

S/N: TBA

9/26/2003 Docket No.: KAW-306-USAP

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Serial No.: TO BE ASSIGNED

Confirmation No.: TO BE ASSIGNED

Applicant: Tadayuki FUSHIMI

Art Unit: TO BE ASSIGNED

Filed: September 26, 2003

Examiner: TO BE ASSIGNED

Docket No: KAW-306-USAP

Customer No: 28892

For: High-Voltage Transformer and Discharge Lamp Driving Apparatus

031088 U.S.PTO
10/670198 092603



UTILITY PATENT APPLICATION TRANSMITTAL

IN ACCORDANCE WITH 37 CFR §1.53 (b)

US Patent & Trademark Office
2011 South Clark Place
Customer Window, Mail Stop: **PATENT APPLICATION**
Crystal Plaza Two, Lobby, Room 1B03
Arlington, VA 22202

Sir:

This application is a:

New Application.

Continuation

Divisional of U.S.P.T.O. Serial Number _____, filed _____.

Continuation in Part of U.S.P.T.O. Serial Number _____, filed _____.

The undersigned has been authorized by the Applicant(s),

Tadayuki FUSHIMI

**FOR: High-Voltage Transformer and Discharge Lamp Driving
Apparatus**

to file the attached specification and required drawings. Please
assign a serial number and accord a filing date to this prospective
application.

Enclosed are:

15 pages of Specification,
2 page(s) of Claims,
1 page of an Abstract, and
10 sheets of Drawings. Total pages in the disclosure are 28.
x Return Receipt Postcard (MPEP 503).
x Application Data Sheet
x Newly executed original Oath or Declaration with Power of Attorney
____ Signed Statement deleting inventor(s) named in prior application.
____ Applicant claims Small Entity status under 37 CFR §1.27.
x Assignment of the Invention and \$80.00.
x A certified copy of Priority Documents.
____ A Preliminary Amendment.
____ Letter to the Official Draftsperson and amended drawing(s).
____ An Information Disclosure Statement (IDS) / PTO Form 1449.
x The basic filing fee of \$750.00.
x The fees for the claims to be calculated as follows:

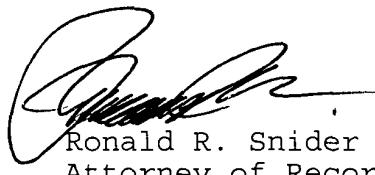
Claims Presented	Less Entitlement	Additional Fees					
		Small Entity		Large Entity			
Total	11	Minus	20	x \$9=	0.00	x \$18=	0.00
Indep.	1	Minus	3	x \$42=	0.00	x \$84=	0.00
New Multiple Dependent Claims		-0-		x\$140=	0.00	x\$280=	0.00
And Claims Dependent Thereon		-0-		x\$140=	0.00	x\$280=	0.00
TOTAL ADDITIONAL FEE				0.00		0.00	

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X A check in the total amount of \$830.00 is enclosed to cover filing fee, Recordation of Assignment fee, and excess claims fee.

X The Commissioner is hereby authorized to charge to my Deposit Account **No. 19-2816** any fees required under any of 37 CFR §§1.16 to 1.17 at any time during the pendency of this application.



Ronald R. Snider
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Registration No. 24,962

Date: September 26, 2003

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